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NEW EVENING HOURS AVAILABLE!

Q. What is Plantar Fasciitis and how can it be treated?

A. Plantar Fasciitis is a result of inflammation of the plantar fascia. The plantar fascia is a thick, non-elastic band of fibrous tissue that runs from the balls of your feet (metatarsal heads) and attaches to your heel. It is an overuse injury that is usually characterized by acute heel pain first thing in the morning or after rest.

Plantar fasciitis occurs when stress is applied to the plantar fascia causing it to pull away from the insertion point (the heel). This can cause small tears to the fascia resulting in inflammation and pain. There are a variety of factors that can cause stress to the fascia such as flat arches (overpronation), tight calf muscles, poor footwear, overuse, and sudden increase in weight.

Symptoms of plantar fasciitis include a sharp pain in the heel that can travel towards the arch of the foot. Pain persists with every step of the foot. As the fascia is pulled away from the heel bone, the body reacts by filling in the space with new bone, which can lead to a heel spur. A heel spur can be detected via x-ray and can be treated in the same way as plantar fasciitis.

Treatment options

Many of the treatment options for plantar fasciitis consist of conservative therapy. Short-term treatment includes stretching and icing of the fascia, proper footwear, padding and strapping, and oral ibuprofen or any other anti-inflammatory. If none of these treatment options are working, physical therapy can be implemented. Finally for a long-term treatment and preventative solution, orthotics can be prescribed. Orthotics will help to re-create the arch and reduce stress on the fascia. Surgical options are available, however not very common. For more information please contact your local chiropodist.

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It Might Be Mites

Demodex infestation requires immediate, aggressive treatment by doctor, and patient

Dry eye disease has the possibility of a resident skin mite as a modulator of the eye condition and eye lid diseases. Frequent tearing, blurred vision, and constant itchy eyelids are some symptoms.

WE ALL HAVE THEM. SOME WORSE THAN OTHERS. And Demodex may be associated with acne.

Patients who suffer from Demodex infestation may complain of eyelid and eyebrow itching (especially in the morning), malarosis, a burning sensation and a foreign body sensation that seems to originate beneath their lids. Demodex blepharitis is observed equally in males and females and is age related. A study by Junemann showed that Demodex is found in 25% of 20-year-olds, 30% of 50-year-olds and 100% in patients older than 90 years.

The Demodex mite is an eight-legged (an arachnid) ectoparasite (living on the surface of the host) that can reside in our hair follicles and sebaceous glands. Of the 65 described Demodex species, only Demodex brevis and Demodex folliculorum are found on humans. Demodex is contracted and spread by either direct contact or dust containing eggs.

Diagnosis is performed during an ocular health assessment and differentiation from non parasitic blepharitis and systemic dry eye conditions are determined by a lid care regimen. A two week period of lid hygiene and compresses are implemented. Infestations are treated in office and relief from dry eye is monitored.

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HearSay
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Q: I notice the earmold for my behind-the-ear hearing aid gets dirty. Is there a way to clean the earmold?

A: One of the advantages of behind-the-ear (BTE) hearing aids is that the earmold can be detached from the hearing aid and cleaned. These suggestions only apply to BTE hearing aids and not to in-the-ear hearing aids. Earmolds are an integral part of BTE hearing instruments. The cleaning of the earmolds allows the sound to proceed from the hearing aid into the ear properly.

To clean earmolds:

1. Disconnect the earmold tubing from the hearing instruments (taking care to keep the left and right instruments separate). The earmold tubing tends to get hard and brittle over time. If it is difficult to separate the earmold from the hearing aid, the tubing likely needs to be replaced by an Audiologist.
2. Wash the earmolds in lukewarm water using a mild soap. Do NOT use strong detergents or alcohol.

**** NOTE: THE HEARING INSTRUMENTS THEMSELVES MUST NEVER BE WASHED!**

3. To remove hardened wax in the tubing try using a small pipe cleaner and gently push back and forth to dislodge and remove wax (or moisture). This also works well for small vents in the earmold.
4. Rinse well with water. The water can be run right through the tube to make sure it is clear.

5. Clear any remaining moisture from the tubing by using an earmold air blower. Audiology clinics as well as pharmacies sell these.
6. Carefully reconnect the tubing to the hearing aid ensuring proper orientation.

If you have any questions, please do not hesitate to call the HearSay Speech and Hearing Centre to speak to one of our Audiologists (905)875-3345.



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Sedation Dentistry

Imagine undergoing a complex dental treatment like a root canal, extraction, or oral surgery. When your treatment is complete, you have no recollection of the time it took, the noise, or the discomfort you were experiencing. We are pleased to offer our patients the option of comfortable, safe, and effective sedation dentistry. Patients who benefit from sedation dentistry have:

- a fear or anxiety of being at the dentist
- a sensitive gag reflex
- a difficult time sitting still for long periods of time
- a difficult time getting numb from anesthetics

What is Sedation Dentistry?

Sedation dentistry allows your doctor to provide a variety of dental treatments safely and comfortably for patients who experience anxiety when visiting the dentist. There are several benefits of sedation dentistry, including:

- No memory of undergoing the procedure
- No sense of time while under sedation
- No sense of smell or sound
- No fear or anxiety during treatment

Anxiolysis is the lightest form of sedation dentistry and is often used for patients with mild to moderate anxiety, longer procedures or more complex situations. Usually administered orally, with mild to moderate sedation, you remain awake or very sleepy throughout the entire procedure and are able to breathe on your own, but you will feel a great sense of relaxation.

How are sedatives administered?

Inhalation Sedation - Nitrous oxide, or laughing gas, is the most frequently used method for easing mild anxiety. Administered through a small mask that fits over your nose, it is an effective way to calm anxiety, raises your pain threshold, and may even make time seem like it's passing quicker than usual. At the end of your appointment, you'll resume breathing regular oxygen, and all the effects of nitrous oxide will disappear, so you can resume your normal activities immediately.

Oral Sedation - an extremely common technique to manage mild to moderate dental anxiety. It is often used in combination with nitrous oxide depending on the level of sedation required. It is easily administered and does not require the use of needles. You will be given a prescription pill, taken about an hour before your appointment begins. Your vitals will be monitored throughout the appointment. Patients typically recover from oral sedation within a few hours after the procedure is complete but must leave accompanied by a responsible adult.

Please contact our practice to schedule a consultation to find out if sedation dentistry is right for you.

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